West Virginia Italian Heritage Festival

SCHOLARSHIP APPLICATION

SECTION I: Background Information

Student's Name: _____
Last First Middle

Gender: _____ Date of Birth: _____

Parent's Names: _____ _____

Number of children in family excluding yourself: ____ Number of children attending college at this time: ____

Parent Home Address: _____

Parent Telephone Number: (____) _____-_____Text: Y/N Parent Email: _____

Is father of Italian descent? _____ Is mother of Italian descent? _____ Were you born in Italy? _____

From which part of Italy does your ancestry originate? _____

Please list any financial difficulty: _____

SECTION II: Academic Information

Current Status: [ ] High School Senior [ ] Undergraduate [ ] Master's Candidate [ ] Doctoral Candidate

Name of former/current high school: _____ Graduation Year: _____

Name of anticipated/current college or university: _____
(please contact us by July if this information changes)

College Major(s): _____ Grade Point Average: _____

Do you speak Italian? [ ] Yes [ ] No Do you write Italian? [ ] Yes [ ] No

Have you previously received a WVIHF Scholarship? [ ] Yes [ ] No

O: 304.622.7314
F: 304.622.5727
340 West Main Street | PO Box 1632
Clarksburg, WV 26302-1632
www.WVIHF.com
WVIHF@WVIHF.com

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SECTION III: Financial Information

Family Income (individual income, if student is independent of parents)

[ ] 0-$9,999 [ ] $10,000-$25,999 [ ] $26,000-$50,999

[ ] $51,000-$75,999 [ ] $76,000-$99,999 [ ] Over $100,000

Amount owed by student per year for college

Total expenses $ _____

Subtract student aid & awards $ _____

Total amount owed to college $ _____

SECTION IV: Essay

In 250 words, please describe the Italian-American who has most influenced you in terms of your goals and aspirations. [If necessary, attach a separate sheet.]

_____
_____
_____
_____
_____
_____
_____
_____

In 250 words, describe an outstanding Italian-American in West Virginia whom you feel has influenced the community at large. [If necessary, attach a separate sheet.]

_____
_____
_____
_____
_____
_____
_____
_____

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REQUIRED ATTACHMENTS TO APPLICATION

- **Registration fee: $10.00 payable to "WVIHF Scholarship Program."**
- **Any necessary essay attachments.**
- **Sealed official transcript (1 copy).**
- **Letter of acceptance to college or graduate school (for high school seniors & college seniors only).**
- **Names and addresses of your school newspaper and two (if possible) hometown newspapers.**
- **One photo (head and shoulder area only, color or black/white)**
  - **Photo will be sent to the media if you are selected to receive a scholarship**
  - **Photo will not be returned; digital copy may be emailed to wvihf@wvihf.com**

THIS APPLICATION MUST BE POSTMARKED NO LATER THAN MARCH 1, 2027.

MAIL COMPLETED APPLICATION TO:

WVIHF Scholarship Program
PO Box 1632
Clarksburg, WV 26302
Phone: 304-622-7314
Email: wvihf@wvihf.com

All applicants selected for scholarship will be notified by May 31, 2027.

Scholarship funds will be sent to the learning institution at the beginning of August 2027.

Student's Signature _____